## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re: RAY L EWING	Case No. 15-31861
Debtor(s)	

## CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on <u>09/18/2015</u>.
- 2) The plan was confirmed on 03/16/2016.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C.  $\S$  1329 on  $\underline{NA}$  .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on  $\underline{NA}$ .
  - 5) The case was dismissed on 02/15/2017.
  - 6) Number of months from filing to last payment: 24.
  - 7) Number of months case was pending: 18.
  - 8) Total value of assets abandoned by court order: NA.
  - 9) Total value of assets exempted: NA.
  - 10) Amount of unsecured claims discharged without payment: \$0.00.
  - 11) All checks distributed by the trustee relating to this case have cleared the bank.

## Receipts:

Total paid by or on behalf of the debtor \$7,650.06 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$7,650.06

## **Expenses of Administration:**

Attorney's Fees Paid Through the Plan \$791.72
Court Costs \$0.00
Trustee Expenses & Compensation \$344.52
Other \$50.00

TOTAL EXPENSES OF ADMINISTRATION: \$1,186.24

Attorney fees paid and disclosed by debtor: \$0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
77TH ST DEPOT FEDERAL C U	Unsecured	4,000.00	3,634.51	3,634.51	145.38	0.00
ADT SECURITY SERVICES	Unsecured	435.87	NA	NA	0.00	0.00
CALUMET DERMATOLOGY ASSOC	Unsecured	113.15	NA	NA	0.00	0.00
CHECK N GO	Unsecured	1,801.69	2,139.52	2,139.52	85.58	0.00
CIGNA HEALTH CARE	Unsecured	73.57	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF FINANCI	Unsecured	1,300.00	630.00	630.00	25.20	0.00
GM FINANCIAL	Unsecured	4,168.58	NA	NA	0.00	0.00
GM FINANCIAL	Secured	25,000.00	29,579.66	29,579.66	4,654.80	798.91
INGALLS MEMORIAL HOSPITAL	Unsecured	73.57	181.63	181.63	7.27	0.00
JEFFERSON CAPITAL SYSTEMS LLC	Unsecured	NA	418.89	418.89	16.76	0.00
PATHOLOGY CONSULTANTS INC	Unsecured	NA	34.68	34.68	1.39	0.00
PRIMARY HEALTHCARE ASSOCIATE	Unsecured	245.38	NA	NA	0.00	0.00
ROBERT J ADAMS & ASSOC	Priority	4,000.00	NA	NA	0.00	0.00
SOUTHWEST LABORATORY	Unsecured	16.17	NA	NA	0.00	0.00
TITLEMAX OF ILLINOIS	Unsecured	NA	0.00	275.85	11.03	0.00
TITLEMAX OF ILLINOIS	Secured	2,000.00	2,275.85	2,000.00	717.50	0.00
VILLAGE OF COUNTRY CLUB HILLS	Unsecured	80.00	NA	NA	0.00	0.00
VILLAGE OF DOLTON DEPT OF REVE	Unsecured	2,000.00	NA	NA	0.00	0.00

<b>Summary of Disbursements to Creditors:</b>			
•	Claim	Principal	Interest
	Allowed	<u>Paid</u>	<u>Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$31,579.66	\$5,372.30	\$798.91
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$31,579.66	\$5,372.30	\$798.91
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$7,315.08	\$292.61	\$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$1,186.24 \$6,463.82	
TOTAL DISBURSEMENTS :		<u>\$7,650.06</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 03/20/2017 By: /s/ Tom Vaughn
Trustee

**STATEMENT**: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.